

EXECUTIVE LOBBYING EXPENDITURE REPORT
FORM 507

- ☒ COVERING JANUARY 1 - JUNE 30, 2005 - DUE AUGUST 15
☐ COVERING JANUARY 1 - DECEMBER 31, _____ - DUE FEBRUARY 15

Mail to: the Board of Ethics, 2415 Quall Dr., 3rd Floor, Baton Rouge, LA 70808
OR

Fax to: (225) 763-8787 or (225) 763-8780

FOR OFFICE USE ONLY

Postmark Date: 6/12/05

ER (06/2005)

3050092

1. Name Spencer Adriane
Last First MI

2. Business Address: 7516 Jeannette Street New Orleans Louisiana 70118
Street and No. City State Zip

Mailing Address same as above

3. Business Phone: (504) 888-0990
Area Code and Telephone Number

4. Total of all executive lobbying expenditures made January 1 through June 30: \$ 0.00
(Include expenditures from Schedules A and B)

5. Total of all executive lobbying expenditures made July 1 through December 31: \$ N/A
(When Applicable) (Include expenditures from Schedules A and B)

6. Total of all executive lobbying expenditures made during calendar year: \$ 0.00
(Line 4 added to Line 5 should equal Line 6)

7. Did you make an expenditure exceeding \$50 on one occasion for an executive branch official:

From January 1 through June 30? Yes ☐ No ☒
From July 1 through December 31? Yes ☐ No ☐ NA ☒

If the answer to either question in Number 7 above is YES, complete Schedule A and attach.

8. Did you make expenditures exceeding the sum of \$250 for an executive branch official:

From January 1 through June 30? Yes ☐ No ☒
From July 1 through December 31? Yes ☐ No ☐ NA ☒

If the answer to either question in Number 8 above is YES, complete Schedule A and attach.

9. Did you expend funds for any reception, social gathering, or other function to which more than twenty-five executive branch officials were invited during this reporting period?

Yes ☐ No ☒

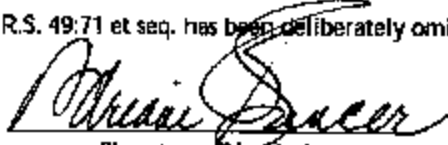
If the answer to Number 9 above is YES, complete Schedule B and attach.

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STATE OF LOUISIANA

- 2) a. Name of Department and Individual Agency: N/A
- b. Total of all expenditures made January 1 through June 30: \$ _____
- c. Total of all expenditures made July 1 through December 31: \$ _____
(When applicable)
- d. Total of all expenditures made during the calendar year: \$ _____
- 3) a. Name of Department and Individual Agency: N/A
- b. Total of all expenditures made January 1 through June 30: \$ _____
- c. Total of all expenditures made July 1 through December 31: \$ _____
(When applicable)
- d. Total of all expenditures made during the calendar year: \$ _____

CERTIFICATION OF ACCURACY

I hereby certify that the information contained herein is true and correct to the best of my knowledge, information, and belief; that all reportable expenditures have been included herein; and that no information required by LSA-R.S. 49:71 et seq. has been deliberately omitted.


Signature of Lobbyist